

KETS PRICE CONTRACT
Professional Development Training Request Form
Master Agreement # M-00205363

Revised February 26, 2002

School District Name:

ExecuTrain of Lexington, 230 Lexington Green Circle, Suite 420, Lexington, KY 40503
Margie Barks (859) 271-0296, FAX (859) 271-5413, email: margieb@lexington.executrain.com

DESCRIPTION	UNIT PRICE	QUANTITY	COST
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
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			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00

Total Education Technology Funds Requested

\$0.00

The cost of these items will be taken out of the District's Allotment for this line item. We verify this has not gone over the State Master Plan budget for this line item (State Board Approved Master Plan of 1998-2000). We verify the above will be purchased (NOT LEASED/BONDED) 100% from the KETS Price Contract and we have sufficient Education Technology Funds in our account to cover these expenditures.

Financial Officer Name:

Date:

District Technology Coordinator Name:

Date:

I verify the District has correctly filled out their request and may proceed to PURCHASE KETS Technology.

KETS Regional Coordinator Name:

Date: